

LD7000123324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

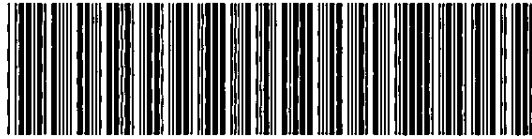
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/04/07--01010--024 **155.00

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07 DEC -4 AM 11:14
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
07 DEC 12 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PK 12/11



RECEIVED

DEC 12 AM 11:10

FLORIDA DEPARTMENT OF STATE
Division of Corporations
TALLAHASSEE, FLORIDA

December 4, 2007

LAZARUS

TALLAHASSEE, FL

SUBJECT: RESETTING INSTITUTE, LLC
Ref. Number: W07000058935

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for RESETTING INSTITUTE, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$155.00 payment.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 407A00068507

LAZARUS
CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

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TALLAHASSEE, FLORIDA

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1. RESTING INSTITUTE, LLC
(Corporation Name) (Document #)
- 2. _____
(Corporation Name) (Document #)
- 3. _____
(Corporation Name) (Document #)
- 4. _____
(Corporation Name) (Document #)

- Walk in
- Pick up time 2:00
- Certified Copy
- Mail out
- Will wait
- Photocopy
- Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials

**ARTICLES OF ORGANIZATION
OF
DOMINIAMERICA, LLC**

ARTICLE I - Name:

The name of the Limited Liability Company is: Dominiamerica, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

150 Alhambra Circle Suite 1270
Coral Gables, FL 33134

ARTICLE III - The officers of the Company are:

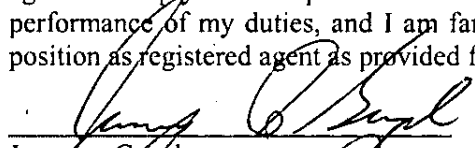
President: Jose Velasquez
Secretary: Laura Campos

ARTICLE IV - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

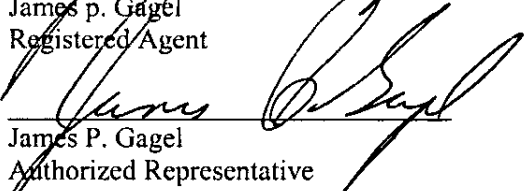
James P. Gagel
150 Alhambra Circle Suite 1270
Coral Gables, FL 33134

Having been named as registered agent and to accept service of process for the above stated limited liability Company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.



James p. Gagel
Registered Agent

Date: December 6, 2007



James P. Gagel
Authorized Representative

Date: December 6, 2007

The execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.

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